CHAIN-OF-CUSTODY / / WO#: 1279075
The Chain-of-Custody is a LEGAL DC

PM: MMW

Due Date: 1 Section C Invoice Information: Attention.

			1	12	11	5	9,	ø	7	ø.	on si		4	P N		ITEM #		Request	Phone:	Email:	Mt. Iron N	Company:	Section A Required (
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	77400	ADDITIONAL COMMENTS:											WS-003 Thickner Overflow	WS-002 Scrubber Make-Up	SAMPLE ID One Character per box. (A-Z, 0-9 /, -) Sample lds must be unique		Requested Due Date:	Fax	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Mt. Iron, MN 55768	ı	≘ E
															7	MATRIX CODE Drinking Walter DW Water WY Water WW Product P Sul/Solid SL Oil Wijse WP AIR AR Other TS		Project #:	Project Name:	Purchase Order#	orby in:	Report To:	Section B Required Project Information:
•			SET INC											ş	×,	MATRIX CODE (see valid codes	to left)		ē	rder#:		Tom	roject
		36	対影										<u> </u>	-	-	SAMPLE TYPE (G=GRAB C=C	OMP)		NPDE			Tom Moe	Inform
SAMPLER NAME AND SIGNATURE PRINT Name of SAMPLER: SIGNATURE of SAMPLER:		" and promoter	RELINGUISHED BY JAFFILIATION											11167608.35 W767608:35	1767608:45 11-167608:45	START TIME			NPDES-LINE 3 WKIY		į		nation:
IPLER NAME AND SIGNATE PRINT Name of SAMPLER: SIGNATURE of SAMPLER:			ž											H-16	11:16:	IME DATE	ECTED						
TE ANT		=	17.0		İ							<u> </u>		809	82 24	<u>""</u>							
SAMPL		117676	DATE											کان	۲۲:۹	JEWE							
ER. ER.		+ + -													,	SAMPLE TEMP AT COLLECTION		70	TO	- ס	> I C) >	= s
		15,00												-		# OF CONTAINERS Unpreserved		Pace Profile #:	Pace Project Manager	Pace Quole	Address.	Attention	Section C Invoice Information:
100		િં														H2SO4		ofile #	oject \	lole	NA ING		C
bul profes						_	\dashv									HNO3 CONTRACTOR OF THE PROPERTY OF THE PROPERT	Drag		Manag		ā		nation
hande															<u> </u>	NaOH §			"				•
			ACCE													Na2S2O3			heat				
			PTED)													Methanol Olher			er zik		:		LIENT:
		_	CCEPTED BY JAFFILIATION												<u> </u>		Y/N .	250	heather.zika@pacelabs.com		-		CLIENT: USS CORP
			HILIAT											×	×	LAB FILTERED: SO4	6	1	elabs				SS
ATE S		$ \ \ $	QN:											×	×	Lab FILTERED: Ca,Mg,Hard		Own do	com		ľ		Sec
DATE Signed:		4												,			Requested Arialysis intered a //N				ŀ		Due Date: P
7		$\perp \Lambda$															O Ana	.rokkalinks.ro					D _a
17/2		111	DATE						_								ysis	C-ACM Motion					6
11-16-16		11-11-11			-											• • • • • • • • • • • • • • • • • • • •		Significant Property		100	Ž.		
6			T														D CYN	700	機能				12/02/16
		3:10	TIME							-						***	A S	mr.mg					:/1
TEMP in C		Ż	11.00(7										:					THE STATE OF	100				Ų,
		نزا														Residual Chlorine (Y/N)		saleh darin b	itate /	- Angel			·· [
Received on Ice		-	SAMPLE											LF,LF	LF,LF			new Color	State / Location				
(Y/N) Custody) 	ECON																Ioi	- Columb	The Street		
Sealed Cooler (Y/N)		<	CONDITIONS																				♀
Samples Intact		1																- C	4				
(Y/N)																		i i		100 m	生成性的		

Pace Analytical *

Document Name:

Sample Condition Upon Receipt Form

Document No.: F-VM-C-001-Rev.09 Document Revised: 23Feb2015 Page 1 of 1

Issuing Authority:

Pace Virginia, Minnesota Quality Office

Sample Conditions Client Name: Upon Receipt Courier Uses Upon Receipt		Project #	₩ ₩0#:1279075
Guitan Deal En Dusc Dusc			
Courier: ☐Fed Ex ☐UPS ☐US ☐Commercial ☐Pace ☐Ot	,	Client	1279075
Tracking Number:			
Custody Seal on Cooler/Box Present? Yes No	Seals I	ntact?	Yes No Optional: Proj. Due Date: Proj. Name:
Packing Material: Bubble Wrap Bubble Bags		Other:	Temp Blank? Yes No
Thermometer Used: 140792808 Type	e of ice: F	lWet Γ	Blue None Samples on ice, cooling process has begu
Cooler Temp Read °C: 29 Cooler Temp Correcte Temp should be above freezing to 6°C Correction Factor: 1	ed °C:	32 Date and	Biological Tissue Frozen? Yes No No Intitials of Person Examining Contents: Comments:
Chain of Custody Present?	es 🔲 No	□N/A	1.
Chain of Custody Filled Out?	es 🔲 No	□N/A	2.
Chain of Custody Relinquished?	es 🔲 No	□N/A	3.
Sampler Name and Signature on COC?	es 🔲 No	□N/A	4.
Samples Arrived within Hold Time?	es 🔲 No	□N/A	5.
Short Hold Time Analysis (<72 hr)?	es 🗹 No	□n/a	6.
Rush Turn Around Time Requested?	es 🔽No	□n/a	7.
Sufficient Volume?	es No	□N/A	8.
Correct Containers Used?	es No	□N/A	9.
-Pace Containers Used?	es 🔲 No	□N/A	
Containers Intact?	es No	□N/A	10.
Filtered Volume Received for Dissolved Tests?	es No	[ZN/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	es []No	□N/A	12.
-Includes Date/Time/ID/Analysis Matrix:			
All containers needing acid/base preservation will be Ye checked and documented in the pH logbook.	es No	□ _M /A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	s 🔲 No	☑N/A	13.
Headspace in VOA Vials (>6mm)?	es 🔲 No	N/A	14.
Trip Blank Present?	es 🗌 No	ĎN/A	15.
Trip Blank Custody Seals Present?	es 🔲 No	ØN/A │	
Pace Trip Blank Lot # (if purchased):			
CLIENT NOTIFICATION/RESOLUTION			Field Data Required? Yes No
Person Contacted:		D	ate/Time:
Comments/Resolution:			
	•		
	-		

FECAL WAIVER ON FILE

TEMPERATURE WAIVER ON FILE

Project Manager Review: Date: 1/16/16

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of

hold, incorrect preservative, out of temp, incorrect containers)